

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	3/3
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71475	4/27/60
RESPONSE FORMALITY REVIEW			6/21/60

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted D Objected

Claim	Final	Original	Date
1	✓	✓	5/10/60
2	✓	✓	5/10/60
3	✓	✓	5/10/60
4	✓	✓	5/10/60
5	✓	✓	5/10/60
6	✓	✓	5/10/60
7	✓	✓	5/10/60
8	✓	✓	5/10/60
9	✓	✓	5/10/60
10	✓	✓	5/10/60
11	✓	✓	5/10/60
12	✓	✓	5/10/60
13	✓	✓	5/10/60
14	✓	✓	5/10/60
15	✓	✓	5/10/60
16	✓	✓	5/10/60
17	✓	✓	5/10/60
18	✓	✓	5/10/60
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20	✓	✓	5/10/60
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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